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Book review

Simpson's Forensic Medicine, J. Payne-James, R. Jones, S.B. Karch, J. Manlove. 13th ed., (2011). 256 pp., ISBN: 9780340986035

Re-reading Simpson's Forensic Medicine, in its 13th edition, has proved a very useful refresher. It remains an informative primer for forensic physicians, whether working in custody, suspicious death or sexual offence examinations; the forensic pathology sections are very helpful for a non-pathologist, especially the caveats about attempting to estimate PMI (likely time of death) by non-specialists, so beloved by TV crime dramas. The chapter on natural causes of death is well illustrated and all of the topics are well referenced for further reading.

The issues of confidentiality and consent are usefully updated, including references to WHO and GMC publications. GMC procedures for fitness to practise have changed since the 12th edition and are summarised. Discussion of medical malpractice and medico-legal aspects of mental disease is very limited but the chapters on the use of force and restraint and on the principles of forensic science are a helpful addition.

This edition is well illustrated, particularly the chapters on types of injuries and ballistic injuries. Advances in DNA technology are referenced and an expanded section on age estimation in the living, which is being requested more commonly around the issues of sexual offences and asylum applications, is included.

When considering child abuse, a separate chapter on pathology examinations and abuse of the living child is helpful. While the list of general alerting features for suspicion of abuse is omitted from the new edition, most are covered within the text. The improbability of skull fracture resulting from the passive fall of a child from a height of less than 80 cm on to a carpeted floor (p71) is a useful detail, when considering possible explanations of injury. I do have doubts, however, about the assertion that 'a single scar left by a cigarette burn is non-specific' (p73) as a cigarette must be held against the skin of the child for some seconds to produce a circular burn, different from the elliptical mark made by accidentally brushing past a cigarette.

New legislation since the 12th edition is highlighted, such as the Children Act 2004, which introduced Local Safeguarding Children Boards and the Domestic Violence, Crime and Victims Act 2004, which introduces the concept of familial homicide. The complex issue of 'shaken baby syndrome' is mentioned but obviously cannot be explored in detail in this type of book.

Perhaps more exploration of the evidence based findings in the referenced 'The Physical Signs of Child Sexual Abuse' 2008, Royal College of Paediatrics and Child Health could have been included: the significance of hymenal lacerations (acute), transections and notches/clefts (non-acute) is not discussed in any detail. There are no illustrations of hymenal injury and there is no mention made of the exploration of the edge of a fimbriated, post-pubertal hymen using the inflated bulb of a female catheter, which is a standard and useful method of examination.

There are some omissions in the chapter on sexual assault: following rape, hepatitis B vaccination is routinely offered in the UK in addition to post exposure prophylaxis for HIV where indicated. Anal examination and swabbing of female complainants are indicated when anal rape is alleged (p131). Vulval, vaginal and anal swabs should be taken within 12 h of digital penetration, to identify the assailant's skin cells. Penile swabs are more commonly taken to identify vaginal secretions rather than semen (p132, Table 12.1). Sanitary tampons/towels used prior to or immediately after the alleged assault should also be seized. In drug facilitated sexual assault, hair samples should be taken a minimum of 4–6 weeks later, rather than immediately, and stored at normal room temperature. Perhaps a fuller description of the examination and sampling of the alleged perpetrator would have been helpful.

Highly sensitive photographic images, such as DVD's of the colposcopic, anogenital examination are not shown in Court in this jurisdiction and should be routinely peer reviewed in order to offer opinion evidence of the significance of findings.

I found the chapters on toxicology very informative, especially on the pharmacology of illicit drugs, although most forensic physicians need to cope with the end result of the biochemistry rather than intervening at the cellular level.

In conclusion, this is an updated classic for every forensic physician's 'must read' list and, as Lord Justice Thomas comments in his foreword, it takes an international perspective and will be of use to all professionals requiring an awareness of the principles of forensic medical and scientific practice – a bridge between law and science and medicine.

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